## Listing of the Claims

1. (Currently amended) A method of managing the use of healthcare services, comprising the steps of:

collecting self-reported information from an individual about their perceived health for a predetermined set of predictive factors;

assigning, based upon said information from said individual, a separate value to each distinct predictive factor of said predetermined set of predictive factors;

generating, based upon a predetermined predictive model and said separate values assigned to said predetermined set of predictive factors, a risk level of said individual <u>becoming</u> a <u>member of the highest utilizing group using healthcare services at a predetermined level for any reason within a prospective time span;</u>

wherein said assigning step comprises the following steps for each said distinct predictive factor of said predetermined set of predictive factors:

determining, based upon said information, whether said distinct predictive factor is indicative of a high risk of said individual <u>becoming a member of the highest</u> utilizing <u>group using said healthcare services at said predetermined level for any reason within said prospective time span;</u>

assigning, based upon said information, a first dichotomous value to said separate value for said distinct predictive factor if said determining step determines that said distinct predictive factor is indicative of said high risk of said individual becoming a member of the <a href="highest utilizing group using">highest utilizing group using</a> said healthcare services at said predetermined level for any reason within said prospective time span; and

assigning, based upon said information, a second dichotomous value to said

separate value for said distinct predictive factor if said determining step determines that said distinct predictive factor is not indicative of said high risk of said individual <u>becoming a member of the highest utilizing group using said healthcare services at said predetermined level for any reason within said prospective time span.</u>

2. (Original) The method of claim 1, wherein said collecting step comprises the step of:

presenting said individual with a self assessment questionnaire designed to elicit said information from said individual for said predetermined set of predictive factors.

3. (Currently amended) The method of claim 1, wherein said collecting step comprises the step of:

presenting said individual with a questionnaire designed to elicit said information from said individual for said predetermined set of predictive factors, said predetermined set of predictive factors eonsisting of including past healthcare use factors, demographic factors, perceived health factors, disease factors, healthcare compliance factors, healthcare belief factors, and healthcare preference factors.

4. (Original) The method of claim 1, wherein said collecting step comprises the step of:

presenting, to a web browser, a questionnaire that elicits said information from said individual for said predetermined set of predictive factors;

receiving, via said web browser, said information for said predetermined set of

predictive factors in response to said presenting step.

- 5-7. (Cancelled).
- 8. (Previously presented) The method of claim 10, further comprising the steps of:

determining, based upon said information from said individual, at least one intervention program for said individual in response to said probability value exceeding said predetermined threshold.

9. (Currently amended) The method of claim 1, wherein said generating step comprises the step of:

generating, based upon said separate values assigned to said set of predictive factors and a logistic regression formula of said predictive model, said risk level of said individual becoming a member of the highest utilizing group using said healthcare services at said predetermined level for any reason within said prospective time span.

10. (Currently amended) The method of claim 1, wherein said generating step comprises the step of:

generating, based upon said separate values assigned to said set of predictive factors and a logistic regression formula of said predictive model, a probability value indicative of said risk level of said individual <u>becoming a member of the highest</u> utilizing <u>group using said</u> healthcare services at said predetermined level <u>for any reason</u> within said prospective time span;

and

determining, based upon said probability value and a predetermined threshold, said risk level of said individual <u>becoming a member of the highest utilizing group using</u> said healthcare services at said predetermined level <u>for any reason</u> within said prospective time span.

11-21. (Cancelled).

22. (Currently amended) The method of claim 1, further comprising the step of:

defining a first reference date in the future; wherein the generating step includes generating said separate values assigned to said predetermined set of predictive factors, a risk level of said individual <u>becoming a member of the highest utilizing group using said</u> healthcare services at a predetermined level <u>for any reason</u> in the time period between a present date and the first reference date.

23-27. (Cancelled).

28. (Currently amended) The method of claim 10, wherein said determining said risk level of said individual <u>becoming a member of the highest</u> utilizing <u>group using</u> said healthcare services at said predetermined level <u>for any reason</u> within said prospective time span step comprises the steps of:

comparing said probability value to said predetermined threshold; identifying said individual as a high-risk person if said probability value exceeds

said predetermined threshold; and

identifying said individual as a low-risk person if said probability value does not exceed said predetermined threshold.

29. (Currently amended) A method of managing the use of healthcare services, comprising the steps of:

presenting an individual with a self assessment questionnaire comprising a plurality of questions designed to elicit collecting self-reported information from an said individual about their perceived health;

collecting a plurality of answers from said individual answering said plurality of questions of said self assessment questionnaire.

determining, based upon said self-reported information, whether each distinct predictor variable of a predetermined set of predictor variables is indicative of a high risk of said individual becoming a member of the highest utilizing group using healthcare services at a predetermined level for any reason;

associating each said distinct predictor variable of said predetermined set of predictor variables to at least one of said plurality of questions of said self assessment questionnaire;

assigning a first dichotomous value to each said distinct predictor variable for which the determining step determines that said distinct predictor variable is indicative of said high risk of said individual <u>becoming a member of the highest utilizing group using said</u> healthcare services for any reason;

assigning a second dichotomous value to each said distinct predictor variable for

which the determining step determines that said distinct predictor variable is not indicative of said high risk of said individual <u>becoming a member of the highest</u> utilizing <u>group using</u> said healthcare services for any reason;

assigning said first dichotomous value to any distinct predictor variable of said predetermined set of predictor variables for which said at least one of said plurality of questions associated with said any distinct predictor variable is unanswered or answered inappropriately;

generating, based upon a predetermined predictive model and said dichotomous values assigned to said predetermined set of predictor variables, a probability value of said individual becoming a member of the highest utilizing group using said healthcare services at said predetermined level for any reason;

comparing said probability value to a predetermined threshold value;

identifying said individual as a high-risk person if said probability value exceeds said predetermined threshold value; and

identifying said individual as a low-risk person if said probability value does not exceed said predetermined threshold value.

30-31. (Cancelled).

32. (Currently amended) The method of claim—30\_29, further comprising the step of:

identifying said individual as a high-risk person if said individual fails to answer or incorrectly answers more than a predetermined number of said plurality of questions of self assessment questionnaire.

33. (Previously presented) The method of claim 29, wherein the collecting step comprises the steps of:

presenting, to a web browser, a self assessment questionnaire designed to elicit said information from said individual for said predetermined set of predictor variables; and receiving, via said web browser, said information for said predetermined set of predictor variables in response to the presenting step.

34. (Previously presented) The method of claim 29, wherein the collecting step comprises the steps of:

presenting a self assessment questionnaire to said individual designed to elicit said information from said individual for said predetermined set of predictor variables, said self assessment questionnaire including a scannable form; and

scanning said scannable form received in response to the presenting step to retrieve said information for said predetermined set of predictor variables.

35. (Previously presented) The method of claim 29, wherein the collecting step comprises the steps of:

presenting a self assessment questionnaire to said individual designed to elicit said information from said individual for said predetermined set of predictor variables using an interactive voice response telephone system; and

receiving said individual's responses to said self assessment questionnaire using said interactive voice response telephone system.

- 36. (Previously presented) The method of claim 29, wherein said first dichotomous value is equal to "1" and said second dichotomous value is equal to "0".
- 37. (Previously presented) The method of claim 29, wherein said predetermined predictive model is a logistic regression predictive model.
- 38. (Currently amended) The method of claim 37, wherein said logistic regression predictive model is represented by

$$\begin{split} z &= \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 \, \dots \, \beta_N X_N + \beta_{N+1} X_1 X_2 + C, \\ P_{high\_use} &= e^z \, / \, (1 \, + e^z) \end{split}$$

wherein  $\beta_1$ ,  $\beta_2$ ,  $\beta_3$ ,  $\beta_4$  ...  $\beta_{N+1}$  represent regression coefficients,

 $X_1,\,X_2,\,X_3,\,X_4\,\ldots\,X_N$  represent said predetermined set of predictor variables, and

 $P_{\text{high\_use}}$  represents said probability value of said individual <u>becoming a member of the highest utilizing group using said healthcare services at said predetermined level <u>for any reason</u>.</u>

39. (Currently amended) A method of managing the use of healthcare services, comprising the steps of:

presenting an individual with a self assessment questionnaire comprising a plurality of questions designed to elicit self-reported information from said individual about their perceived health for a predetermined set of predictor variables;

collecting said self-reported information from said individual through answers to

said plurality of questions of said self assessment questionnaire by said individual;

associating each distinct predictor variable of said predetermined set of predictor variables with at least one of said plurality of questions of self assessment questionnaire;

determining for each said distinct predictor variable whether said distinct predictor variable is indicative of a high risk of said individual becoming a member of the highest utilizing group using said healthcare services at a predetermined level for any reason based upon said answers to said at least one of said plurality of questions associated with said distinct predictor variable;

assigning a first dichotomous value to each said distinct predictor variable for which said determining step determines that said distinct predictor variable is indicative of said high risk of said individual <u>becoming a member of the highest</u> utilizing <u>group using</u> said healthcare services <u>for any reason</u>;

assigning a second dichotomous value to each said distinct predictor variable for which said determining step determines that said distinct predictor variable is not indicative of said high risk of said individual <u>becoming a member of the highest utilizing group using said</u> healthcare services <u>for any reason</u>;

assigning said second <u>first</u> dichotomous value to each said distinct predictor variable for which said at least one of said plurality of questions associated with said distinct predictor variable is unanswered or answered inappropriately;

generating, based upon a predetermined predictive model and said dichotomous values assigned to said predetermined set of predictor variables, a probability value of said individual becoming a member of the highest utilizing group using said healthcare services at said predetermined level for any reason;

comparing said probability value to a predetermined threshold value;
identifying said individual as a high-risk person if said probability value exceeds
said predetermined threshold value;

identifying said individual as a low-risk person if said probability value does not exceed said predetermined threshold value; and

identifying said individual as said high-risk person if said individual fails to answer or inappropriately answers more than a predetermined number of said plurality of questions of said self assessment questionnaire.

40. (Previously presented) The method of claim 39, wherein said collecting step comprises the steps of:

presenting, to a web browser, said self assessment questionnaire; and receiving, via said web browser, said self reported information for said predetermined set of predictor variables in response to said presenting step.

41. (Previously presented) The method of claim 39, wherein the collecting step comprises the steps of:

presenting a self assessment questionnaire to said individual designed to elicit said information from said individual for said predetermined set of predictor variables, said self assessment questionnaire including a scannable form; and

scanning said scannable form received in response to the presenting step to retrieve said information for said predetermined set of predictor variables.

42. (Previously presented) The method of claim 39, wherein the collecting step comprises the steps of:

presenting a self assessment questionnaire to said individual designed to elicit said information from said individual for said predetermined set of predictor variables using an interactive voice response telephone system; and

receiving said individual's responses to said self assessment questionnaire using said interactive voice response telephone system.

43. (Currently amended) The method of claim 39, wherein said predetermined predictive model is a logistic regression predictive model represented by

$$z = \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 \ ... \ \beta_N X_N + \beta_{N+1} X_1 X_2 + C,$$

$$P_{high\_use} = e^z / (1 + e^z)$$

wherein  $\beta_1$ ,  $\beta_2$ ,  $\beta_3$ ,  $\beta_4$  ...  $\beta_{N+1}$  represent regression coefficients,

X<sub>1</sub>, X<sub>2</sub>, X<sub>3</sub>, X<sub>4</sub> ... X<sub>N</sub> represent said predetermined set of predictor variables, and

 $P_{\text{high\_use}}$  represents said probability value of said individual <u>becoming a member of the highest utilizing group using said healthcare services at said predetermined level for any reason.</u>